



County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

PHILIP L. BROWNING
Interim Director

December 19, 2011

To: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning
Interim Director

Board of Supervisors
GLORIA MOLINA
First District
MARK RIDLEY-THOMAS
Second District
ZEV YAROSLAVSKY
Third District
DON KNABE
Fourth District
MICHAEL D. ANTONOVICH
Fifth District

SAND HILL GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW

In accordance with your Board's April 14, 2009 motion, we are informing your Board of the results of a group home compliance review.

Sand Hill Group Home has one site located in Los Angeles County's 2nd Supervisorial District. The Group Home provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to Sand Hill Group Home's program statement, its purpose is to "provide services to court dependent seriously emotionally disturbed and chronic run-away children." Sand Hill Group Home is licensed to serve a capacity of six boys, ages 13 through 18.

The Out-of-Home Care Management Division (OHCMD) conducted a review of Sand Hill Group Home in October 2010 at which time the agency had one six-bed site and four placed DCFS children. For the purpose of this review, four placed children were interviewed and their case files were reviewed. The placed children's overall average length of placement was two months, and the average age was 16. Five staff files were reviewed for compliance with Title 22 regulations and contract requirements.

Two children were on psychotropic medication. We reviewed their case files to assess timeliness of psychotropic medication authorizations and to confirm that medication logs documented correct dosages were being administered as prescribed.

SCOPE OF REVIEW

The purpose of this review was to assess Sand Hill Group Home's compliance with the contract and State regulations. The visit included a review of Sand Hill Group Home's program statement, administrative internal policies and procedures, four children's case files, and a random sampling of personnel files. A visit was made to the site to assess the quality of care and supervision provided to the children and we conducted interviews with four children to assess the care and services they were receiving.

A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

SUMMARY

Generally, Sand Hill Group Home was providing good quality care to DCFS placed children, and providing services as outlined in its program statement. The children's case files and personnel files were well organized and professionally maintained. The site was clean and adequately landscaped. All four children interviewed said they felt safe at the Group Home.

However, at the time of the review, the Group Home needed to maintain sufficient age-appropriate recreational equipment, obtain the DCFS Children's Social Worker's (CSW) authorization to implement the Needs and Services Plan (NSP), develop comprehensive NSPs, and ensure that initial medical and dental examinations are timely.

The Executive Director, the Administrator and her staff were accessible, cooperative and willing to make the necessary corrections regarding the findings noted during the review.

NOTABLE FINDINGS

The following are the notable findings of our review:

- The Group Home needed to maintain age-appropriate sufficient recreational equipment in good condition.
- The Group Home needed to obtain the DCFS CSW's authorization to implement the NSP.
- Of the three initial and six updated NSPs reviewed, none were comprehensive or met all the required elements in accordance with the NSP template. Of those deficient NSPs, none contained the children's and DCFS CSW's signature authorizing implementation of the NSPs. In addition, updated NSPs did not provide the dates of the relative's telephone calls.
- The Group Home needed to ensure that initial medical and dental examinations are timely.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held March 1, 2011:

In attendance:

La Ronnica Whitehurst, Administrator, Sand Hill Group Home and Edward Preer, Monitor, DCFS OHCMD.

Highlights:

The Administrator was in agreement with the findings and recommendations. During the Exit Conference, she stated that Sand Hill Group Home planned to follow up with the staff to ensure that they continue to improve their documentation on the NSPs to ensure that the NSPs are comprehensive.

The draft report was sent to the Group Home Administrator for comment, however, OHCMD did not receive a response in the allotted timeframe. Therefore, OHCMD proceeded with finalizing the report.

As agreed, Sand Hill Group Home provided a written Corrective Action Plan (CAP) addressing the recommendations noted in this compliance report. The CAP is attached.

As noted in the monitoring protocol, a follow-up visit will be conducted to address the provider's approved CAP and assess for full implementation of recommendations.

If you have further questions, please call me or your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:RS:KR
EAH:DC:ep

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
La Ronnica Whitehurst, Administrator, Sand Hill Group Home
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

**SAND HILL GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY**

12108 S. Normandie Ave.
Los Angeles, CA 90044
License Number: 191801773
Rate Classification Level: 9

	Contract Compliance Monitoring Review	Findings: October 2010
I	<u>Licensure/Contract Requirements</u> (9 Elements) <ol style="list-style-type: none"> 1. Timely Notification for Child's Relocation 2. Stabilization to Prevent Removal of Child 3. Transportation 4. SIRs 5. Compliance with Licensed Capacity 6. Disaster Drills Conducted 7. Disaster Drill Logs Maintenance 8. Runaway Procedures 9. Allowance Logs 	Full Compliance (ALL)
II	<u>Facility and Environment</u> (6 Elements) <ol style="list-style-type: none"> 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non-Perishable Food 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance
III	<u>Program Services</u> (8 Elements) <ol style="list-style-type: none"> 1. Child Population Consistent with Program Statement 2. DCFS CSW Authorization to Implement NSPs 3. Children's Participation in the Development of NSPs 4. NSPs Implemented and Discussed with Staff 5. Therapeutic Services Received 6. Recommended Assessments/Evaluations Implemented 7. DCFS CSWs Monthly Contacts Documented 8. Comprehensive NSPs 	<ol style="list-style-type: none"> 1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed
IV	<u>Educational and Emancipation Services</u> (4 Elements) <ol style="list-style-type: none"> 1. Emancipation/Vocational Programs Provided 2. ILP Emancipation Planning 3. Current IEPs Maintained 4. Current Report Cards Maintained 	Full Compliance (ALL)

V	<u>Recreation and Activities</u> (3 Elements) <ol style="list-style-type: none"> 1. Participation in Recreational Activity Planning 2. Participation in Recreational Activities 3. Participation in Extra-Curricular, Enrichment and Social Activities 	Full Compliance (ALL)
VI	<u>Children's Health-Related Services (including Psychotropic Medications)</u> (9 Elements) <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 3. Medication Logs 4. Initial Medical Exams Conducted 5. Initial Medical Exams Timely 6. Follow-up Medical Exams Timely 7. Initial Dental Exams 8. Initial Dental Exams Timely 9. Follow-Up Dental Exams Timely 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Improvement Needed 6. Full Compliance 7. Full Compliance 8. Improvement Needed 9. Full Compliance
VII	<u>Personal Rights</u> (11 Elements) <ol style="list-style-type: none"> 1. Children Informed of Group Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 4. Staff Treatment of Children with Respect and Dignity 5. Appropriate Rewards and Discipline System 6. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed about Psychotropic Medication 11. Children Aware of Right to Refuse Psychotropic Medication 	Full Compliance (ALL)
VIII	<u>Children's Clothing and Allowance</u> (8 Elements) <ol style="list-style-type: none"> 1. \$50 Clothing Allowance 2. Adequate Quantity of Clothing Inventory 3. Adequate Quality of Clothing Inventory 4. Involvement in Selection of Clothing 5. Provision of Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance 8. Encouragement and Assistance with Life Book 	Full Compliance (ALL)

IX	<p><u>Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)</u> (12 Elements)</p> <ol style="list-style-type: none"> 1. Education/Experience Requirement 2. Criminal Fingerprint Cards Timely Submitted 3. CACIs Timely Submitted 4. Signed Criminal Background Statement Timely 5. Employee Health Screening Timely 6. Valid Driver's License 7. Signed Copies of GH Policies and Procedures 8. Initial Training Documentation 9. CPR Training Documentation 10. First Aid Training Documentation 11. On-going Training Documentation 12. Emergency Intervention Training Documentation 	Full Compliance (ALL)

**SAND HILL GROUP HOME PROGRAM
CONTRACT COMPLIANCE MONITORING REVIEW**

**12108 S. Normandie Ave.
Los Angeles, CA 90044
License Number: 191801773
Rate Classification Level 9**

The following report is based on a "point in time" monitoring visit. This compliance report is only intended to report the findings noted during the October 2010 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review of four children's files, five staff files, and/or documentation from the provider, Sand Hill Group Home was in full compliance with six of nine sections of our Contract Compliance review: Licensure/Contract Requirements, Educational and Youth Development Services; Recreation and Activities; Personal Rights; Clothing and Allowance; and Personnel Records. The following report details the results of our review.

FACILITY AND ENVIRONMENT

Based on our review of four children's files and/or documentation from the provider, Sand Hill Group Home fully complied with five of six elements reviewed in the area of Facility and Environment.

The Group Home's exterior and grounds were well maintained. The Group Home's common quarters provided a home-like environment that was well maintained. Also, the children's bedrooms were clean, orderly, and well maintained.

The Group Home provided the children with a variety of books, magazines, educational materials, and computer access. In addition, the Group Home had recreational equipment such as balls, board games, and bicycles for the children, however, the bicycle tires were flat.

The Group Home maintained adequate supply of properly stored perishable and non-perishable foods.

Recommendation:

Sand Hill Group Home management shall ensure that:

1. The Group Home maintains sufficient recreational equipment in good condition.

PROGRAM SERVICES

Based on our review of four children's files and/or documentation from the provider, Sand Hill Group Home fully complied with six of eight elements reviewed in the area of Program Services.

We noted that placed children met the Group Home's population criteria as outlined in its program statement. They were assessed for needed services within 30 days and received the required therapeutic services. Recommendations on required and/or recommended assessments/evaluations were implemented.

Based on our review, we found that the treatment team developed and implemented the NSPs with the participation of age-appropriate children, as well as discussed NSPs with the group home staff. However, of the three initial and six updated NSPs none were comprehensive and the NSPs did not meet all the required elements in accordance with the NSP template. Specifically, of those deficient NSPs, they did not contain the DCFS CSW's signature authorization to implement the NSP. In addition, updated NSPs did not provide the dates of the relative's telephone calls.

Recommendations:

Sand Hill Group Home Management shall ensure that:

2. They develop comprehensive NSPs.
3. They obtain the DCFS CSW's signature authorization to implement the NSP.
4. They obtain the dates of the relative's telephone calls.

CHILDREN'S HEALTH-RELATED SERVICES, INCLUDING PSYCHOTROPIC MEDICATION

Based on our review of four children's files and/or documentation from the provider, Sand Hill Group Home fully complied with seven of nine elements reviewed in the area of Children's Health-Related Services, including Psychotropic Medication.

The Group Home obtained current court authorizations to administer psychotropic medication to the two placed children on psychotropic medication. The Group Home maintained medication logs; however, the Group Home did not provide a timely initial medical and dental examination for one child. The administrator reported that they had difficulty scheduling the medical and dental appointment for the child due to the doctor and dentist's schedules. The children received timely follow-up medical and dental examinations.

Recommendation:

Sand Hill Group Home management shall ensure that:

5. Timely initial medical and dental examinations are conducted for all placed children.

**PRIOR YEAR FOLLOW-UP FROM DCFS GROUP HOME'S CONTRACT
COMPLIANCE MONITORING REVIEW**

Objective

Determine the status of the recommendations reported in the Group Home's last monitoring review.

Verification

We verified whether the outstanding recommendations from our last Group Home's Contract Compliance Monitoring Review conducted in September 22, 2009, was implemented.

Results

The Group Home's prior monitoring report contained ten outstanding recommendations. Specifically, Sand Hill Group Home was to ensure that the Group Home's exterior grounds were well maintained; That the recreational equipment was maintained in good condition; that the children were provided with the minimum monetary allowance; that the children's population is consistent with the criteria in the Program Statement; that the children are free to manage their allowance; that employees receive the required on-going training; and that employees receive emergency intervention training per the Group Home's Program Statement. Based on our follow up of these recommendations, Sand Hill Group Home fully implemented nine of ten recommendations.

Recommendation:

Sand Hill Group Home management shall ensure that:

6. They fully implement the one outstanding recommendation from the Contract Compliance Monitoring Review conducted September 22, 2009, which is noted in this report as Recommendation One.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

The A-C conducted a fiscal review of Sand Hill Group Home for fiscal year 2004. The fiscal report, dated April 29, 2004 states Sand Hill Group Home had \$3,177 in questioned/disallowed costs and \$11,307 in unsupported/inadequately supported costs. Sand Hill Group Home submitted a timely fiscal CAP which is being monitored by DCFS' Fiscal Monitoring Section.